Debtor 1 Barbara M Eddy  Debtor 2 (Spouse, if filling)  Linited States Bankruptcy Court for the: Western District of Washington  Case number (if known)    Case number (if known)	Filli	n this information to identify your case:			Ch	eck one box only a	as directed in this for	m and in
Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the: Western District of Washington  Case number ((if known)  (if known)  Official Form 22A - 1  Chapter 7 Statement of Your Current Monthly Income  2/2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 22A-2)  Check if this is an amended filing  Official Form 22A - 1  Chapter 7 Statement of Your Current Monthly Income  2/2. The calculation of the public of the public of the public of the public of qualified military service but it could apply later.  Check if this is an amended filing  Official Form 22A - 1  Chapter 7 Statement of Your Current Monthly Income  2/2. The calculation of the public of the public of the public of the public of qualifying military and the additional information applies. On the to of any out on the average with our name and case number (if known). If you believe that you are exemption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under 5 (770/b/2) (Official Form 22A-1Supp) with this form.  Port 1:  Calculate Your Current Monthly Income  1. What is your marrial and filing status? Check one only.  Not married. Fill out Column A, lines 2-11.  Married and your spouse is NOT filing with you. You and your spouse are legally separated. Fill out both Columns A and B, lines 2-11.  Living in the same household and are not legally separated. Fill out both Column B. By checking this box, you declare under penalty of perjuy that you and your spouse are legally separated with the penalty of perjuy that you and your spouse are legally separated. Fill out both Column B. By checking this box, you declare under penalty of perjuy that you and your spouse are legally separated with the penalty of penalty of penalty for the your and your spouse are legally separated with the penalty of penalty of the your penalty of penalty of the your penalt	Debi	for 1 Parbara M Eddy						
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Chapter 7 Statement of Your Current Monthly Income  22A - 1  Chapter 7 Statement of Your Current Monthly Income  23 as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies, on the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Prosumption of Abuse Under § 707(b)2() (Official Form 22A-1Supp) with this form.  2a Not married. Fill out Column A, Lines 2-11.  3 Not married. Fill out Column A, Lines 2-11.  3 Not married. Fill out Column A, Lines 2-11.  3 Not married and your spouse is NOT filing with you. You and your spouse are:  4 Living separately or are legally separated. Iiil out Column A, lines 2-11.  4 Living separately or are legally separated. Iiil out Column A, lines 2-11.  5 Living separately or are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Mears Test recipiements. 11 J.S.C. § 707(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if you are fili								
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Official Form 22A-1

7. Interest, dividends, and royalties

**Chapter 7 Statement of Your Current Monthly Income** 

0.00

page 1

Best Case Bankruptcy

				Column A Debtor 1		Column B Debtor 2 or non-filing s	pouse	
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amou under the Social Security Act. Instead, list it here:	int received was a bene	efit					
	·	\$ 0.	.00					
	For you Spouse	\$	<del></del>					
9.	<b>Pension or retirement income.</b> Do not include any a benefit under the Social Security Act.		as a	\$	0.00	\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hi domestic terrorism. If necessary, list other sources on total on line 10c.	Security Act or payme umanity, or international	nts al or					
	10a.			\$	0.00	\$		
	10b			\$	0.00	\$		
	10c. Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add I each column. Then add the total for Column A to the t		\$	1,707.61	+ \$		= \$	1,707.61
							incom	
Part	2: Determine Whether the Means Test Applies	to You						
12.	Calculate your current monthly income for the yea	r. Follow these steps:						
	12a. Copy your total current monthly income from line	<del>:</del> 11		Copy	line 11 h	<b>ere=&gt;</b> 12a.	\$	1,707.61
	,,,							1,7 07 .01
	Multiply by 12 (the number of months in a year)						<b>X</b>	12
	12b. The result is your annual income for this part of t	the form				12b.		20,491.32
13.	Calculate the median family income that applies to	vou. Follow these ste	eps:					
			,ρο.					
	Fill in the state in which you live.	WA						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size	e of household.				13.	\$	53,234.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, c	heck box	1, There is	no presum	ption of abus	э.	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 22A-2.	of page 1, check box 2	2, The pr	esumption o	f abuse is	determined by	Form 2	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjur	ry that the information of	on this sta	atement and	in any atta	achments is tr	ue and	correct.
	V /o/ Parhara M Eddy							
	X /s/ Barbara M Eddy Barbara M Eddy							
	Signature of Debtor 1							
	Date May 5, 2015							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Fo	rm 22A-2.						
	If you checked line 14b, fill out Form 22A-2 and f	file it with this form.						

Official Form 22A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 2

Barbara M Eddy	Case number (if known)

## **Current Monthly Income Details for the Debtor**

## **Debtor Income Details:**

Income for the Period 11/01/2014 to 04/30/2015.

## Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Janes Company, Inc

Income by Month:

Debtor 1

11/2014	\$0.00
12/2014	\$0.00
01/2015	\$2,013.08
02/2015	\$2,734.14
03/2015	\$2,506.36
04/2015	\$2,992.09
Average per month:	\$1,707.61
	01/2015 02/2015 03/2015 04/2015